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PTO/SB/01 (10-00)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	0764
	<b>First Named Inventor</b>	Thomas PELS
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09 / 905,254
	<b>Filing Date</b>	July 14 , 2001
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GEARBOX

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

July 14 , 2001

as United States Application Number or PCT International

(if applicable).

Application Number

09/905,254

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
DE 100 35 335.5	Germany	07/18/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DE 100 38 455.2	Germany	08/07/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DE 101 08 990.2	Germany	02/03/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DE 101 15 055.5	Germany	03/27/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

☒ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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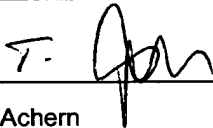
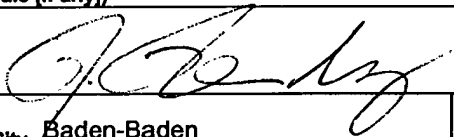
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## DECLARATION — Utility or D sign Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	20676	OR <input type="checkbox"/>	Correspondence address below
Name Alfred J. Mangels					
Address 4729 Cornell					
Address					
City Cincinnati		State Ohio		ZIP 45241	
Country US		Telephone (513) 469-0470		Fax (513) 489-6030	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) Thomas			Family Name or Surname PELS		
Inventor's Signature 			Date 28.08.01		
Residence: City Achern		State	Germany Country	German Citizenship	
Mailing Address Holzstrasse 36					
Mailing Address					
City Achern		State	ZIP D-77855	Country Germany	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) Dierk			Family Name or Surname REITZ		
Inventor's Signature 			Date 28.8.01		
Residence: City Baden-Baden		State	Germany Country	German Citizenship	
Mailing Address Stephaniensstrasse 7					
Mailing Address					
City Baden-Baden		State	ZIP D-76530	Country Germany	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Reinhard				BERGER			
Inventor's Signature	<i>R. Berger</i>					Date	27.8.01
Residence: City	Bühl	State		Country	Germany	Citizenship	German
Post Office Address: Sassenweg 6							
Post Office Address:							
City	Bühl	State		ZIP	D-77815	Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Wolfgang				REIK			
Inventor's Signature	<i>W. Reik</i>					Date	27.8.01
Residence: City	Bühl	State		Country	Germany	Citizenship	German
Post Office Address: Sonnhalde 8							
Post Office Address:							
City	Bühl	State		ZIP	D-77815	Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Robert				FISCHER			
Inventor's Signature	<i>Robert Fischer</i>					Date	27.8.01
Residence: City	Bühl	State		Country	Germany	Citizenship	German
Post Office Address: Fichtenstrasse 16							
Post Office Address:							
City	Bühl	State		ZIP	D-77815	Country	Germany

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